

POLICY BRIEF

30% of Recent Family Medicine Graduates Report Participation in Loan Repayment Programs

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Rising educational debt may discourage entry into primary care and practice in safety net settings, but little is known about participation in loan repayment programs that are thought to be part of the solution. A survey of 2052 recent family physician residency graduates found that 30% pursued loan repayment, only a portion of which is tied to service obligations, suggesting opportunities for research and areas for the attention of policymakers. (J Am Board Fam Med 2018;31:000501–502.)

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Nearly 60% of recent family medicine residency graduates report >\$150,000 of educational debt.¹ Several loan repayment programs exist to ease the debt burden of primary care physicians, but only the National Health Service Corps and select state loan repayment programs require a commitment to practice in underserved communities.^{2,3} Research shows that a growing cohort of medical graduates intend to pursue Public Service Loan Forgiveness (PSLF), which forgives the loans of borrowers who are employed by public or nonprofit entities.^{2,3} Because 75% of hospitals qualify as nonprofit institutions, however, PSLF is thought to have limited potential to address maldistribution in the primary care workforce.^{3,4}

To address limited evidence of family medicine physician participation in loan repayment programs, we used data from the 2016 Family Medicine National Graduates Survey and identified participation by program type.⁵ Survey re-

spondents were certified family physicians who completed residency in 2013 (n = 2052). Among the 30% of respondents who reported participation in loan repayment programs, 50% received repayment sponsored by hospitals, employers, or the federal government through PSLF. Meanwhile, only 13% of these respondents reported participation in National Health Service Corps loan repayment or scholarship programs (Figure 1).

Although primary care physicians increasingly report debt that is burdensome enough to affect the region in which they plan to live and provide care, we found that the minority of recent family medicine graduates participate in loan repayment programs. At least half of those who do favor PSLF or hospital- and employer-sponsored programs, which are unlikely to alter workforce maldistribution. Policies to alter maldistribution of the US healthcare workforce would greatly benefit from further understanding of factors that influence the distribution of family physicians in loan repayment programs.

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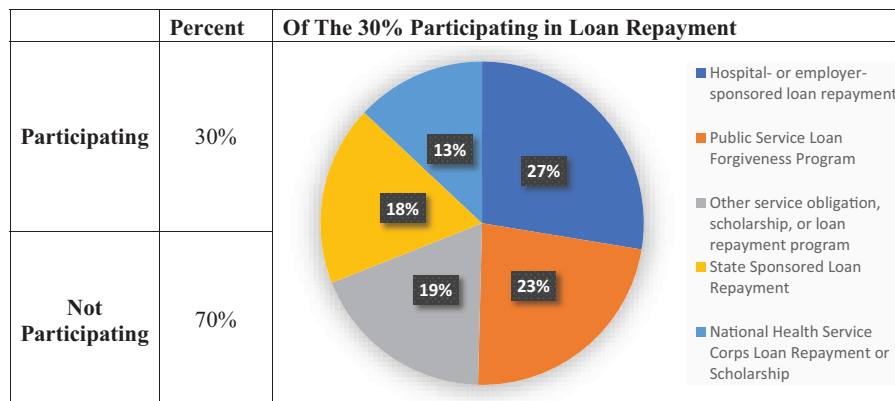
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See Related Commentary on Page 499.

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Figure 1. Distribution of family physicians reporting participation in loan repayment programs.



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